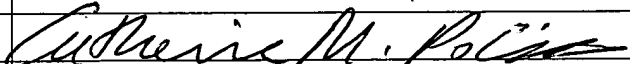
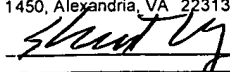


<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	Patent No.: 6,949,245
		Filing Date	Issued: September 27, 2005
		First Named Inventor	Mark SLIWKOWSKI
		Art Unit	1643
		Examiner Name	A. Holleran
Total Number of Pages in This Submission	775	Attorney Docket Number	146392015800

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form + 4 copies (5 pages) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): See Remarks
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <p style="text-align: center;">RECEIVED AUG 2 2012 PATENT EXTENSION OPLA</p> </div> <div style="width: 65%;"> <p>Remarks</p> <ul style="list-style-type: none"> Application for Extension of patent Term under 35 USC 156 + 4 copies (65 pages) Attachment A + 4 copies (75 pages, includes coversheet) Attachment B + 4 copies (60 pages, includes coversheet) Attachment C + 4 copies (310 pages, includes coversheet) Attachment D + 4 copies (10 pages, includes coversheet) Attachment E + 4 copies (15 pages, includes coversheet) Attachment F + 4 copies (30 pages, includes coversheet) Attachment G + 4 copies (15 pages, includes coversheet) Attachment H + 4 copies (20 pages, includes coversheet) Attachment I + 4 copies (130 pages, includes coversheet) Attachment J + 4 copies (15 pages, includes coversheet) Attachment K + 4 copies (20 pages, includes coversheet) Return Receipt Postcard </div> </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP (Customer No. 25226)		
Signature			
Printed name	Catherine M. Polizzi		
Date	August 2, 2012	Reg. No.	40,130

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FEE TRANSMITTAL		Complete if Known	
		Application Number	Patent No.: 6,949,245
		Filing Date	Issued: September 27, 2005
		First Named Inventor	Mark SLIWKOWSKI
		Examiner Name	A. Holleran
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	1642
TOTAL AMOUNT OF PAYMENT		(\$)	1,120.00
		Practitioner Docket No.	146392015800

METHOD OF PAYMENT (check all that apply)

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	380	190	620	310	250	125	
Design	250	125	120	60	160	80	
Plant	250	125	380	190	200	100	
Reissue	380	190	620	310	750	375	
Provisional	250	125	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	60	30
Each independent claim over 3 (including Reissues)	250	125
Multiple dependent claims	450	225

Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims
 - 20 or HP = _____ x _____ = _____ Fee (\$) Fee Paid (\$)
 HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)
 - 3 or HP = _____ x _____ = _____
 HP = highest number of independent claims paid for, if greater than 3.

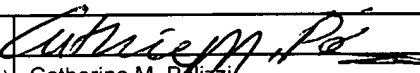
3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$310 (\$155 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)
 - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) _____
 Non-electronic filing fee under 37 CFR 1.16(t) for a utility application, \$400 fee (\$200 small entity) _____
 Other (e.g., late filing surcharge): 1457 Extension of term of patent 1,120.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	40,130
Name (Print/Type)	Catherine M. Polizzi	Telephone	(650) 813-5651
		Date	August 2, 2012

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